

<i>SERFF Tracking Number:</i>	<i>PSEN-126952553</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Fidelity Life Association, A Legal Reserve Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>47558</i>
<i>Company Tracking Number:</i>	<i>FLAROPWADB</i>		
<i>TOI:</i>	<i>H21 Health - Other</i>	<i>Sub-TOI:</i>	<i>H21.000 Health - Other</i>
<i>Product Name:</i>	<i>ROPwADB</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: Fidelity Life Association, A Legal Reserve Life Insurance Company

Product Name: ROPwADB

SERFF Tr Num: PSEN-126952553 State: Arkansas

TOI: H21 Health - Other

SERFF Status: Closed-Approved-
Closed

State Tr Num: 47558

Sub-TOI: H21.000 Health - Other

Co Tr Num: FLAROPWADB

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Rosalind Minor

Authors: Barbara Ritzke, Chuck
Ritzke, Deb Howver, Gary
Newman, Jean Nickele

Disposition Date: 12/29/2010

Date Submitted: 12/20/2010

Disposition Status: Approved-
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 12/29/2010

State Status Changed: 12/29/2010

Deemer Date:

Created By: Deb Howver

Submitted By: Deb Howver

Corresponding Filing Tracking Number:

PPACA: Not PPACA-Related

PPACA Notes: null

Filing Description:

This submission consists of Form F3726 Return of Premium Rider that will be used in conjunction with policy form F3700(04/06)AR, a standalone Accidental Death Insurance Policy, previously approved in your state.

This is a new form not intended to replace any forms currently on file with your state.

<i>SERFF Tracking Number:</i>	<i>PSEN-126952553</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Fidelity Life Association, A Legal Reserve Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>47558</i>
<i>Company Tracking Number:</i>	<i>FLAROPWADB</i>		
<i>TOI:</i>	<i>H21 Health - Other</i>	<i>Sub-TOI:</i>	<i>H21.000 Health - Other</i>
<i>Product Name:</i>	<i>ROPwADB</i>		
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Form F3726 will be offered as a rider attached to previously approved Accidental Death Insurance Policy form F3700(04/06)AR. This rider provides a return of premium benefit equal to a percentage of eligible premiums that are paid while this rider is in force. Premiums include those paid for the policy and any attached riders. Eligible premiums exclude those premiums that are waived as a result of any waiver of premium benefit.

The percentage of eligible premiums to be returned is based upon a schedule of percentages at the end of each policy year as shown in the attached Appendix A. The schedule is based upon the issue age of the rider. If premiums have not been paid to an anniversary, the percentage returned is a pro-rata percentage between the percentages from the previous and next policy anniversary based upon the portion of premiums paid for that year.

This rider expires on the policy anniversary shown in the schedule of percentages in Appendix A. This rider terminates upon the earlier of (a) the request of the owner; (b) the end of the grace period as defined in the base policy; (c) the death of the insured under the policy; or (d) reaching the expiry date for this rider. Return of premium benefits are paid upon any termination of this rider except for termination due to accidental death that results in the death benefit payable under the policy. This rider does not increase the death benefits payable under the policy. The base policy may continue under the terms of the policy while the insured is alive after this rider has terminated.

The rider is issued at ages 20-65. The rider is non-participating.

Company and Contact

Filing Contact Information

Debbie Howver,	deb@myactuary.com
35W841 Burr Oak Lane	224-402-2156 [Phone]
West Dundee, IL 60118	847-551-1795 [FAX]

Filing Company Information

(This filing was made by a third party - problemsolvingenterprises)

Fidelity Life Association, A Legal Reserve Life Insurance Company	CoCode: 63290	State of Domicile: Illinois
1211 West 22nd Street	Group Code:	Company Type:
Suite 209	Group Name:	State ID Number:
Oak Brook, IL 60523	FEIN Number: 36-1068685	
(630) 533-0392 ext. [Phone]		

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Fidelity Life Association, A Legal Reserve Life Insurance Company	\$50.00	12/20/2010	43117976

SERFF Tracking Number:	PSEN-126952553	State:	Arkansas
Filing Company:	Fidelity Life Association, A Legal Reserve Life Insurance Company	State Tracking Number:	47558
Company Tracking Number:	FLAROPWADB		
TOI:	H21 Health - Other	Sub-TOI:	H21.000 Health - Other
Product Name:	ROPwADB		
Project Name/Number:	/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	12/29/2010	12/29/2010

SERFF Tracking Number: *PSEN-126952553* *State:* *Arkansas*
Filing Company: *Fidelity Life Association, A Legal Reserve Life Insurance Company* *State Tracking Number:* *47558*
Company Tracking Number: *FLAROPWADB*
TOI: *H21 Health - Other* *Sub-TOI:* *H21.000 Health - Other*
Product Name: *ROPwADB*
Project Name/Number: */*

Disposition

Disposition Date: 12/29/2010

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: PSEN-126952553 State: Arkansas

Filing Company: Fidelity Life Association, A Legal Reserve Life Insurance Company State Tracking Number: 47558

Company Tracking Number: FLAROPWADB

TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other

Product Name: ROPwADB

Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Supporting Document	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Supporting Document	Third Party Authorization Letter	Approved-Closed	Yes
Supporting Document	F3726 Statement of Variability	Approved-Closed	Yes
Form	Return of Premium Rider	Approved-Closed	Yes

SERFF Tracking Number: PSEN-126952553 State: Arkansas

Filing Company: Fidelity Life Association, A Legal Reserve Life Insurance Company State Tracking Number: 47558

Company Tracking Number: FLAROPWADB

TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other

Product Name: ROPwADB

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Form Schedule

Lead Form Number: F3726

Schedule Item	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 12/29/2010	F3726	Policy/Cont ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		46.200	FLA_F3726_ Return of Premium Rider_101220 _Final.pdf

RETURN OF PREMIUM RIDER

This rider is part of the Accidental Death Benefit policy to which it is attached.

RIDER PART OF POLICY: This rider is attached to and made a part of this policy in return for the application and the payment of premiums for this rider. Those premiums are shown on the Return of Premium Rider Schedule on page 3. All the provisions of this policy apply to this rider, except for those that are inconsistent with this rider.

RIDER BENEFIT: The benefit provided by this rider is the addition of a Return of Premium Benefit equal to the return of a percentage of Eligible Premiums Paid. This Return of Premium Benefit does not increase the death benefit of the policy nor does it increase the benefits for any other rider attached to this policy, except for this Return of Premium Benefit as defined here.

RETURN OF PREMIUM BENEFIT: The Return of Premium Benefit on any policy anniversary equals accumulated Eligible Premiums Paid multiplied by the Percent Return of Premium shown on the Return of Premium Rider Schedule on page 3, assuming policy premiums have been paid to that anniversary. If policy premiums have not been paid to that anniversary, then the applicable Percent Return of Premium will equal a pro-rata percent between the applicable percent from the previous policy anniversary and the next policy anniversary as shown on the Percent Return of Premium schedule, based on the premiums that have been paid during the current policy year.

EFFECT ON DEATH BENEFITS: The Return of Premium Benefit does not increase the death benefit or other rider benefits provided by the Accidental Death Benefit policy to which this Rider is attached. In the event the Insured's death, if no death benefit is payable under the Accidental Death Benefit policy to which this Rider is attached, the Return of Premium Benefit will be payable.

ELIGIBLE PREMIUMS PAID: Eligible Premiums Paid are defined as follows:

- The premiums paid based upon the Eligible Annual Premiums shown on the Return of Premium Rider Schedule on Page 3. These Eligible Annual Premiums are based upon the premiums for eligible benefits at the time this policy is issued. Should the eligible benefits be changed after the policy is issued, then the notification of this change will contain a revised schedule of Eligible Annual Premiums, effective as of the date the change is effective.
- If the payment mode for premiums is other than annual, then the Eligible Premiums Paid will be based upon the Eligible Annual Premiums multiplied by the modal factor for the payment mode being paid.
- Only paid premiums that were due while this rider was in effect are included in the Eligible Premiums Paid. In particular, if this rider is added after the Effective Date of the policy, only premiums paid after the Effective Date and before the Expiry Date of this rider are eligible. Should the eligible premiums change due to a change in the base policy or other attached riders, the eligible premiums returned will be based upon the eligible premiums in effect at the time those premiums were paid. The Effective Date and Expiry Date for this rider are shown on the Return of Premium Rider Schedule on page 3.
- Premiums that are waived as a result of any waiver of premium benefit are not included in the Eligible Premiums Paid under this rider.

PAYMENT OF RETURN OF PREMIUM BENEFIT: The Return of Premium Benefit is payable upon Your request. The Return of Premium Benefit is also payable while this rider is in effect at the end of the Grace Period due to an unpaid premium as defined in the base policy. The Return of Premium Benefit will be determined as of the date that unpaid premiums were due. We will send You the Return of Premium Benefit at the end of the Grace Period. Premiums for this rider or any other terminated benefits that are paid beyond the end of the policy month during which a requested surrender was made will be added to the Return of Premium Benefit, but excluded from the calculation of the Return of Premium Benefit.

We may defer payment of the Return of Premium Benefit payable for up to six months from the date the benefit becomes payable. If payment is delayed for 30 days or more, we will pay You interest at a rate of at least 2.5% a year on the amount we owe You.

RETURN OF PREMIUM RIDER

Continued from previous page.

PAYMENT AT RIDER EXPIRY: If this rider remains inforce on the Expiry Date of this rider, the Return of Premium Benefit will automatically be paid to You in a lump sum. This rider will terminate upon payment of the Return of Premium Benefit, but the base policy and other riders may continue inforce per their conditions.

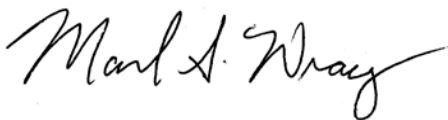
TERMINATION OF THIS RIDER: This rider ends automatically:

- a. On the Expiry Date of this rider, as shown on the Return of Premium Rider Schedule Page; or
- b. When the policy terminates for any reason; or
- c. Upon payment of the Return of Premium Benefit under this rider; or
- d. At the end of the Grace Period defined in the base policy

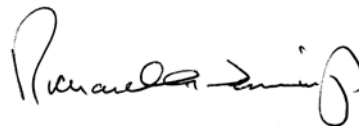
CANCELLATION OF THIS RIDER: This rider may be cancelled by a written request. Cancellation will take effect on the date we receive the written request at our Home Office.

FIDELITY LIFE ASSOCIATION, A LEGAL RESERVE LIFE INSURANCE COMPANY

[



Secretary



President]

Fidelity Life Association
[1211 West 22nd Street, Suite 209
Oak Brook, IL 60523]

Address for correspondence:

Fidelity Life Association
[P.O. Box 9269
Oak Brook, IL 60522-9269]

SERFF Tracking Number: PSEN-126952553 State: Arkansas
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Company Tracking Number: FLAROPWADB
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: ROPwADB
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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification	Approved-Closed	12/29/2010
Comments:		
Attachments:		
FLA_F3726_ROP_Readability Certification_std.pdf		
AR_Certification to Regulations 19 & 49.pdf		

	Item Status:	Status Date:
Satisfied - Item: Application	Approved-Closed	12/29/2010
Comments:		
Application Form F1060 (05/06) approved on 06/12/06 and Electronic Application Form F1060E AR approved 09/09/08.		

	Item Status:	Status Date:
Bypassed - Item: Outline of Coverage	Approved-Closed	12/29/2010
Bypass Reason: Not applicable to this filing.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: PPACA Uniform Compliance Summary	Approved-Closed	12/29/2010
Bypass Reason: Not applicable to this filing.		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: Third Party Authorization Letter	Approved-Closed	12/29/2010
Comments:		

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Company Tracking Number: FLAROPWADB
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: ROPwADB
Project Name/Number: /

Attachment:

FLA_ThirdPartyAuthorization_100225.pdf

	Item Status:	Status Date:
Satisfied - Item: F3726 Statement of Variability	Approved-Closed	12/29/2010
Comments:		
Attachment:		
FLA_ROPWADB_F3726_Statement of Variability.pdf		

READABILITY CERTIFICATION

Company Name: Fidelity Life Association

NAIC Number: 63290

FEIN Number: 36-1068685

Subject: Return of Premium Rider, form F3726

As an officer of Fidelity Life Association, I hereby certify that the following forms achieve a Flesch score that meets or exceeds requirements as follows:

<u>Form Number(s)</u>	<u>Flesch Score</u>
<u>F3726</u>	<u>46.2</u> when combined with base policy F3700(04/06)

Officer Name and Title

December 16, 2010
Date

ARKANSAS CERTIFICATION

I, Ciaran Brady, Vice President – Operations, for Fidelity Life Association, do hereby attest and certify to the following:

- The Company has further reviewed its issuance procedures and is compliance with Regulation 49, Life and Health Insurance Guaranty Association Notices.
- This submission meets the provisions of Regulation 19, Unfair Sex Discrimination in the Sale of Insurance, as well as all applicable requirements of the Arkansas Insurance Department.

FIDELITY LIFE ASSOCIATION

Ciaran Brady, Vice President - Operations

December 17, 2010

Date



Established 1896

Innovation Is Our PolicySM

Fidelity Life Association
1211 West 22nd Street, Suite 209
Oak Brook, IL 60523
Tel: 630.522.0392 Fax: 866.375.8175

February 25, 2010

To Whom It May Concern:

Please allow this letter to serve as authorization for Problem Solving Enterprises, Inc. and Newman Insurance Compliance Solutions, LLC to make rate, rule and form filings on behalf of Fidelity Life Association, a Legal Reserve Life Insurance Company. Problem Solving Enterprises and Newman Insurance Compliance Solutions serve as actuarial and compliance consultants for Fidelity Life Association.

Any questions may be directed to me at 630-371-1888.

Sincerely,

A handwritten signature in black ink, appearing to read 'C. Brady'.

Ciaran Brady
Vice President of Operations

Statement of Variability

Company: Fidelity Life Association, A Legal Reserve Life Insurance Company

Contract Forms: F3726 Return of Premium Rider

Page #	[Variable Item]	Statement of Variability
2	Officer's Signatures/Company Address/Correspondence Address	Changed if company home office location, correspondence address, or company officer's change.